PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10/620237

(Column 1)						mn 2)	SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
TO	OTAL CLAIMS		20					RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE		OR	BASIC FEE	\$790
TOTAL CHARGEABLE CLAIMS			20 minus 20=		*			X\$25≡		OR	X\$ <i>57</i> =	
INE	DEPENDENT CL	_AIMS	minus 3 =		* (¥60≠		OR	×200=	
ML	JLTIPLE DEPEN	IDENT CLAIM P					+/85		OR	+360=		
* If the difference in column 1 is less than zero					"0" in c	olumn 2		TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II								×	<u> </u>	J	OTHER	
		(Column 1)		(Colur		(Column 3)	1 ,	SMALL		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	×\$\$ =	ADDI- TIONAL .FEE	OR	RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		· ·		X\$ % =		
	Independent	*	Minus	***		=		760 X 42 =	Λ.	OR	×840	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							180			360 +280-	
								+ 140 =		OR :	TOTAL	
								ADDIT, FEE	<u> </u>	OR	ADDIT FEE	
		(Column 1)	navata a	(Colur		(Column 3)	,	- <u>- </u>		. 1		
AMENDMENT B		REMAINING AFTER. AMENDMENT:		NUM PREVIO	BER	PRESENT EXTRA	#13. Sec.	RATE	ADDI- TIONAL FEE	in the second	RATE	ADDI- TIONAL FEE
	Total		Minus	**				×\$ ₽=		ØŔ	X STO	
	Independent	* 1	Minus	***				120		ÖR	200 X84≡	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							180			360	
								+ 140 = (OR:	1280-	
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		. (Colur		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		25° X\$ % =		OR	50 X \$18 =	
	Independent	*	Minus	***		=		X42=	·		200 X 8 4=	
	FIRST PRESE	NȚATION OF M	ULTIPLE DEI	PENDENT	CLAIM]	180 + 140=		OR	360	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+ 280 =	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR.	TOTAL ADDIT: FEE	
		mber Previously Pa iber Previously Pa					er fou	ind in the app	ropriate bo	k in co	lumn 1.	